



KANSAS CORPORATION COMMISSION 1107526  
OIL & GAS CONSERVATION DIVISION

Form ACO-1  
June 2009  
Form Must Be Typed  
Form must be Signed  
All blanks must be Filled

**WELL COMPLETION FORM**  
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 34350  
Name: Altavista Energy, Inc.  
Address 1: 4595 K-33 Highway  
Address 2: PO BOX 128  
City: WELLSVILLE State: KS Zip: 66092 +  
Contact Person: Phil Frick  
Phone: ( 785 ) 883-4057  
CONTRACTOR: License # 5989  
Name: Finney, Kurt dba Finney Drilling Co.  
Wellsite Geologist: None  
Purchaser:

Designate Type of Completion:

- New Well     Re-Entry     Workover
- Oil     WSW     SWD     SLOW  
 Gas     D&A     ENHR     SIGW  
 OG     GSW     Temp. Abd.  
 CM (Coal Bed Methane)  
 Cathodic     Other (Core, Expl., etc.):

If Workover/Re-entry: Old Well Info as follows:

Operator:  
Well Name:  
Original Comp. Date:    Original Total Depth:  
 Deepening     Re-perf.     Conv. to ENHR     Conv. to SWD  
 Conv. to GSW  
 Plug Back:    Plug Back Total Depth  
 Commingled    Permit #:   
 Dual Completion    Permit #:   
 SWD    Permit #:   
 ENHR    Permit #:   
 GSW    Permit #:

08/29/2012	08/31/2012	08/31/2012
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-031-23306-00-00  
Spot Description:  
SW NW NW SW Sec. 14 Twp. 22 S. R. 16  East  West  
2145 Feet from  North /  South Line of Section  
5115 Feet from  East /  West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE     NW     SE     SW

County: Coffey  
Lease Name: Sauder    Well #: 10

Field Name:  
Producing Formation: Squirrel

Elevation: Ground: 1034    Kelly Bushing: 1034  
Total Depth: 1092    Plug Back Total Depth: 1041

Amount of Surface Pipe Set and Cemented at: 57 Feet

Multiple Stage Cementing Collar Used?  Yes  No  
If yes, show depth set:    Feet

If Alternate II completion, cement circulated from: 1069  
feet depth to: 0 w/ 150 sx cmt.

**Drilling Fluid Management Plan**

(Data must be collected from the Reserve Pit)

Chloride content: 0 ppm    Fluid volume: 30 bbls  
Dewatering method used: Evaporated

Location of fluid disposal if hauled offsite:

Operator Name:  
Lease Name:    License #:   
Quarter    Sec.    Twp.    S. R.     East  West  
County:    Permit #:

**AFFIDAVIT**

I am the affiant and I hereby certify that all requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Submitted Electronically

**KCC Office Use ONLY**

- Letter of Confidentiality Received  
Date: \_\_\_\_\_  
 Confidential Release Date: \_\_\_\_\_  
 Wireline Log Received  
 Geologist Report Received  
 UIC Distribution  
ALT  I  II  III Approved by: Deanna Garrison Date: 01/14/2013



1107526

Operator Name: Altavista Energy, Inc. Lease Name: Sauder Well #: 10  
 Sec. 14 Twp. 22 S. R. 16  East  West County: Coffey

**INSTRUCTIONS:** Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface test, along with final chart(s). Attach extra sheet if more space is needed. Attach complete copy of all Electric Wire-line Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Squirrel	1019	+15
Electric Log Run	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Electric Log Submitted Electronically <i>(If no, Submit Copy)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
List All E. Logs Run:				
Gamma Ray/Neutron/CCL				

**CASING RECORD**  New  Used

Report all strings set-conductor, surface, intermediate, production, etc.

Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
Surface	12.25	7	19	57	50/50 Poz	35	See Ticket
Production	5.875	2.875	7	1069	50/50 Poz	150	See Ticket

**ADDITIONAL CEMENTING / SQUEEZE RECORD**

Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
Perforate				
Protect Casing				
Plug Back TD				
Plug Off Zone				

**PERFORATION RECORD - Bridge Plugs Set/Type**  
Specify Footage of Each Interval Perforated

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth
3	1019-1027 - 25 Perfs - 2" DML RTG		

**TUBING RECORD:** Size: \_\_\_\_\_ Set At: \_\_\_\_\_ Packer At: \_\_\_\_\_ Liner Run:  Yes  No

Date of First, Resumed Production, SWD or ENHR: 11/01/2012 Producing Method:  Flowing  Pumping  Gas Lift  Other (Explain) \_\_\_\_\_

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	2				

<b>DISPOSITION OF GAS:</b> <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	<b>METHOD OF COMPLETION:</b> <input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	<b>PRODUCTION INTERVAL:</b> _____ _____
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**CONSOLIDATED**  
Oil Well Services, LLC

**REMIT TO**  
Consolidated Oil Well Services, LLC  
Dept. 970  
P.O. Box 4346  
Houston, TX 77210-4346

MAIN OFFICE  
P.O. Box 884  
Chanute, KS 66720  
620/431-9210 • 1-800/467-8676  
Fax 620/431-0012

**INVOICE**

Invoice # 252495

Invoice Date: 08/30/2012 Terms: 0/0/30,n/30

Page 1

ALTAVISTA ENERGY INC  
4595 K-33 HIGHWAY  
P.O. BOX 128  
WELLSVILLE KS 66092  
(785) 883-4057

SAUDER ~~10~~ -10  
37507  
14-22-16  
08-29-2012  
KS

Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	35.00	10.9500	383.25
1118B	PREMIUM GEL / BENTONITE	59.00	.2100	12.39
1111	SODIUM CHLORIDE (GRANULA	74.00	.3700	27.38
1110A	KOL SEAL (50# BAG)	175.00	.4600	80.50
Description		Hours	Unit Price	Total
611	TON MILEAGE DELIVERY	73.24	1.34	98.14
666	CEMENT PUMP (SURFACE)	1.00	825.00	825.00
666	EQUIPMENT MILEAGE (ONE WAY)	.00	4.00	.00
666	CASING FOOTAGE	56.00	.00	.00
675	80 BBL VACUUM TRUCK (CEMENT)	1.50	90.00	135.00

Parts: 503.52 Freight: .00 Tax: 31.71 AR 1593.37  
 Labor: .00 Misc: .00 Total: 1593.37  
 Sublt: .00 Supplies: .00 Change: .00

Signed \_\_\_\_\_

Date \_\_\_\_\_

BARTLESVILLE, OK  
918/338-0808

EL DORADO, KS  
316/322-7022

EUREKA, KS  
620/583-7664

PONCA CITY, OK  
580/762-2303

OAKLEY, KS  
785/672-2227

OTTAWA, KS  
785/242-4044

THAYER, KS  
620/839-5269

GILLETTE, WY  
307/686-4814





**CONSOLIDATED**  
Oil Well Services, LLC

**REMIT TO**  
Consolidated Oil Well Services, LLC  
Dept. 970  
P.O. Box 4346  
Houston, TX 77210-4346

MAIN OFFICE  
P.O. Box 884  
Chanute, KS 66720  
620/431-9210 • 1-800/467-8676  
Fax 620/431-0012

INVOICE

Invoice # 252597

Invoice Date: 08/31/2012 Terms: 0/0/30,n/30

Page 1

ALTAVISTA ENERGY INC  
4595 K-33 HIGHWAY  
P.O. BOX 128  
WELLSVILLE KS 66092  
(785) 883-4057

SAUDER #10  
37405  
14-22-16  
08-31-2012  
KS

Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	150.00	10.9500	1642.50
1118B	PREMIUM GEL / BENTONITE	352.00	.2100	73.92
1111	SODIUM CHLORIDE (GRANULA	315.00	.3700	116.55
1110A	KOL SEAL (50# BAG)	750.00	.4600	345.00
4402	2 1/2" RUBBER PLUG	1.00	28.0000	28.00

  

Description	Hours	Unit Price	Total
611 TON MILEAGE DELIVERY	1.00	420.59	420.59
666 CEMENT PUMP	1.00	1030.00	1030.00
666 EQUIPMENT MILEAGE (ONE WAY)	45.00	4.00	180.00
666 CASING FOOTAGE	1069.00	.00	.00
675 80 BBL VACUUM TRUCK (CEMENT)	2.00	90.00	180.00

Parts: 2205.97 Freight: .00 Tax: 138.98 AR 4155.54  
 Labor: .00 Misc: .00 Total: 4155.54  
 Sublt: .00 Supplies: .00 Change: .00

Signed \_\_\_\_\_ Date \_\_\_\_\_

BARTLESVILLE, OK 918/338-0808 EL DORADO, KS 316/322-7022 EUREKA, KS 620/583-7664 PONCA CITY, OK 580/762-2303 OAKLEY, KS 785/672-2227 OTTAWA, KS 785/242-4044 THAYER, KS 620/839-5269 GILLETTE, WY 307/686-4914

